

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED

Aug 12 1998 8:00am  
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE  
 Sandra B. Mortham  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # S18942 (0)  
 1. Corporation Name  
 ALTAMONTE SURVEYING AND PLATTING, INC.



Principal Place of Business: 445 DOUGLAS AVENUE, SUITE 1955, ALTAMONTE SPRINGS FL 32714 US  
 Mailing Address: POST OFFICE BOX 16094, ALTAMONTE SPRINGS FL 32714 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business  
 21 445 Douglas Ave.  
 22 Suite 1455  
 23 Altamonte Springs, FL  
 24 32714  
 25  
 26 P.O. BOX 161094  
 27 Suite, Apt. #, etc.  
 28 Altamonte Springs, FL  
 29 32714  
 30 U.S.

3. Date Incorporated or Qualified: 11/15/1990  
 4. FEI Number: 59-3059020  
 5. Certificate of Status Desired: \$8.75 Additional Fee Required  
 6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees  
 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes  No

9. Name and Address of Current Registered Agent  
 SOLITRO, MICHAEL W.  
 413 W CITRUS ST  
 ALTAMONTE SPRINGS FL 32714

10. Name and Address of New Registered Agent  
 81 Name  
 82 Street Address (P.O. Box Number is Not Acceptable)  
 83  
 84 City  
 85 Zip Code: FL

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE: \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE: \_\_\_\_\_

12. OFFICERS AND DIRECTORS	
TITLE	PST <input type="checkbox"/> DELETE
NAME	SOLITRO, MICHAEL W.
STREET ADDRESS	413 W CITRUS STR
CITY-ST-ZIP	ALTAMONTE SPRINGS FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

4/8/12

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 \*\*\*150.00

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: \_\_\_\_\_ Michael W. Solitro

CR2E034 (5/98)

Altamonte Surveying & Platting  
P.O. Box 161094  
Altamonte Springs, FL 32714  
(407) 862-7555

*pf 2*

July 21, 1998

Annual Reports Filings  
Division of Corporations  
P.O. Box 1500  
Tallahassee, FL 32302-1500

Dear Sir/Madam:

Enclosed please find the 1998 Florida Corporation Annual Report. As indicated on the report, your records were not correct regarding the mailing address of the corporation. Your records indicated an incorrect P.O. Box number of 16094; the correct number is 161094.

As a result of this error, we did not receive the initial report. We have filed this report promptly in every year since our incorporation in 1990. Hence, as the late filing of this report is not due to the negligence or willful intent of the corporation, we respectfully request that the \$ 400 late filing fee be abated. A check for \$ 150 is enclosed. If you should have any questions, please contact me at (407) 862-7555.

Sincerely,



Michael W. Solitro  
President